



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM

**RECEIVED**

By Carol Day at 11:08 am, Mar 06, 2015

**INTOX EC/IR II MAINTENANCE REPORT**

REPORT #3

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX EC/IR II SN

12697

NAME OF AGENCY

Foristell Police Depart

DATE OF INSPECTION

03/06/2015

LOCATION OF INSTRUMENT (STREET AND CITY)

30 First Street Foristell, Mo 63348

TIME OF INSPECTION

08:19 CST

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

☒ **DIAGNOSTIC RECORD**

☒ BLANK CHECK

☒ CO2 CHECK

☒ FC 1 TEMP

☒ FLOW CHECK

☒ SRC TEMP

☒ FCB CHECK

☒ DET TEMP

☒ CRC COMP CHECK

☒ BT TEMP

☒ CRC CAL CHECK

☒ STD 2 TEMP

☒ PRINT TEST

☒ ETH CHECK

**BREATH ANALYZER ACCURACY STANDARDS**

☐ SIMULATOR SOLUTION

☒ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Intox

LOT# AG326802

EXP. DATE 09/25/2015

☐ SIMULATOR TEMP (34°C ±0.2°C)

SIMULATOR S/N

SIMULATOR EXP DATE

☒ **CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**

Run three tests using a standard solution. All three tests must be within +5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☐ 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

☒ 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

☐ 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 <sup>1.5"</sup> 0.080 g/210L

TEST 2 <sup>1.5"</sup> 0.080 g/210L

TEST 3 <sup>1.5"</sup> 0.080 g/210L

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:**

REFUSALS	0	0-.04	55	.05-.09	2	.10-.14	1	.15-.19	1	OVER .19	1
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

**INSPECTING OFFICER**

SIGNATURE

*[Signature]*  
701

PRINT FULL NAME

D G Johnson 701

TYPE II PERMIT NUMBER

230290

EXPIRATION DATE

11/26/2015

TELEPHONE NUMBER

( 636 ) 463-2123

**RETURN COMPLETED REPORT TO THE:**

Breath Alcohol Program, Missouri Department of Health and Senior Services,  
Southeast District Office, 2875 James Blvd, Poplar Bluff, MO 63901



Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63103  
Ph: (314) 533-3100  
Fax: (314) 533-7328

## Certificate of Analysis

Customer Name  
Intoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Test Date: 26-Sep-2013

**Lot # AG326802**

Exp. Date  
25-Sep-2015

Cyl. Type  
108

Component  
Ethanol  
Nitrogen

Certified Concentration  
0.080 ± 0.002 BrAC (218 ppm)  
Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm
EB0010570	259.8 ppm
EB0010285	209.0 ppm
EB0010561	103.7 ppm
EB0010681	52.22 ppm

<u>Serial No.</u>	<u>Concentration</u>
EB0010603	392.5 ppm
EB0010559	258.9 ppm
EB0010595	208.9 ppm
EB0010562	104.9 ppm
EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control  
Date: 2013.09.26 13:14:36 -05:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

Analyst: \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

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PERMIT  
TYPE II

DOUGLAS JOHNSON

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX EC/IR II

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 11/26/2013

NUMBER 230290

EXPIRES 11/26/2015

MO 595-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Gal Vosterly

, acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

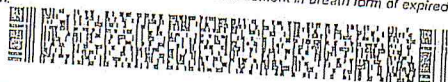
LAB-4 (R6-10)



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator JOHNSON, DOUGLAS  
Permit No 230290

Date Issued 11/26/2013 Date Expires 11/26/2015